

POSITION

INITIALS

ID NO.

DATE

FEE DETERMINATION

O.I.P.E. CLASSIFIER

FORMALITY REVIEW

RESPONSE FORMALITY REVIEW

R.B.

TC 400
TOTB

01-10-01

05/02/01

INDEX OF CLAIMS

✓ Rejected N Non-elected
= Allowed I Interference
- (Through numeral)..... Canceled A Appeal
÷ Restricted O Objected

Claim	Final	Original	Date
1	✓	✓	7/1/01
2	✓	✓	7/1/01
3	✓	✓	7/1/01
4	✓	✓	7/1/01
5	✓	✓	7/1/01
6	✓	✓	7/1/01
7	✓	✓	7/1/01
8	✓	✓	7/1/01
9	✓	✓	7/1/01
10	✓	✓	7/1/01
11	✓	✓	7/1/01
12	✓	✓	7/1/01
13	✓	✓	7/1/01
14	✓	✓	7/1/01
15	✓	✓	7/1/01
16	✓	✓	7/1/01
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25	✓	✓	7/1/01
26	✓	✓	7/1/01
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28	✓	✓	7/1/01
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30	✓	✓	7/1/01
31	✓	✓	7/1/01
32	✓	✓	7/1/01
33	✓	✓	7/1/01
34	✓	✓	7/1/01
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36	✓	✓	7/1/01
37	✓	✓	7/1/01
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39	✓	✓	7/1/01
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41	✓	✓	7/1/01
42	✓	✓	7/1/01
43	✓	✓	7/1/01
44	✓	✓	7/1/01
45	✓	✓	7/1/01
46	✓	✓	7/1/01
47	✓	✓	7/1/01
48	✓	✓	7/1/01
49	✓	✓	7/1/01
50	✓	✓	7/1/01

Claim	Final	Original	Date
51	✓	✓	7/1/01
52	✓	✓	7/1/01
53	✓	✓	7/1/01
54	✓	✓	7/1/01
55	✓	✓	7/1/01
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89	✓	✓	7/1/01
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96	✓	✓	7/1/01
97	✓	✓	7/1/01
98	✓	✓	7/1/01
99	✓	✓	7/1/01
100	✓	✓	7/1/01

Claim	Final	Original	Date
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BEST AVAILABLE COPY

If more than 150 claims or 10 actions
staple additional sheet here

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